

**APPLICATION DATA SHEET****Application Information**

Application number::

Filing Date::

Application Type:: Regular

Subject Matter:: Utility

Suggested classification::

Suggested Group Art Unit::

CD-ROM or CD-R?:: None

Number of CD disks::

Number of copies of CDs::

Sequence submission?::

Computer Readable Form (CRF)?:: No

Number of copies of CRF::

Title :: SHELLFISH DRESSING DEVICE AND  
METHOD

Attorney Docket Number:: 200017.438

Request for Early Publication?:: No

Request for Non-Publication?:: No

Suggested Drawing Figure::

Total Drawing Sheets:: 5

Small Entity?:: Yes

Petition included?:: No

Petition Type::

Licensed U.S. Gov't Agency::

Contract or Grant No::

Secrecy Order in Parent Appl.?:: No

**First Applicant Information**

Applicant Authority Type::	Inventor
Primary Citizenship Country::	US
Status::	Full Capacity
Given Name::	David
Middle Name::	A.
Family Name::	Holcomb
Name Suffix::	
City of Residence::	Seattle
State or Province of Residence::	WA
Country of Residence::	US
Street of mailing address::	10520 Valmay Avenue Northwest
City of mailing address::	Seattle
State or Province of mailing address::	WA
Country of mailing address::	US
Postal or Zip Code of mailing address::	98177

**Second Applicant Information**

Applicant Authority Type:: Inventor  
Primary Citizenship Country:: US  
Status:: Full Capacity  
Given Name:: Jason  
Middle Name:: O.  
Family Name:: Germany  
Name Suffix::  
City of Residence:: Seattle  
State or Province of Residence:: WA  
Country of Residence:: US  
Street of mailing address:: 2108 North Pacific Street #207  
City of mailing address:: Seattle  
State or Province of mailing address:: WA  
Country of mailing address:: US  
Postal or Zip Code of mailing address:: 98103

**Correspondence Information**

Correspondence Customer Number :: **00500**

**Representative Information**

Representative Customer Number::		<b>00500</b>
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**Domestic Priority Information**

Application ::	Continuity Type::	Parent Application::	Parent Filing Date::

**Foreign Priority Information**

Country::	Application number::	Filing Date::	Priority Claimed::

**Assignee Information**

Assignee name::	ChefN Corporation
Street of mailing address::	1520 4th Avenue, 3rd Floor
City of mailing address::	Seattle
State or Province of mailing address::	WA
Country of mailing address::	US
Postal or Zip Code of mailing address::	98101

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